

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>for new nonprovisional applications under 37 CFR 1.53(b)</small>	Attorney Docket No.	2000-0356	Total Pages	56
	First Named Inventor or Application Identifier			
	Joseph Thomas O'Neil			
	Express Mail Label No.	EL618317271US		

<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning utility patent application contents		ADDRESS TO:	Commissioner for Patents Box Patent Application Washington, D.C. 20231	
1. <input checked="" type="checkbox"/> Fee Transmittal Form <small>(submit an original, and a duplicate for fee processing)</small> 2. <input checked="" type="checkbox"/> Specification [Total Pages 30] <small>(preferred arrangement set forth below)</small> - Descriptive title of invention - Cross References to Related Applications - Statement Regarding Fed sponsored R&D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings(if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 3. <input checked="" type="checkbox"/> Drawing(s)(35 USC 113) [Total Sheets 17] 4. Oath or Declaration [Total Pages 2] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application(37 CFR 1.63(d)) <small>(for continuation/divisional with Box 17 completed)</small> <i>[Note Box 5 below]</i> i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 163(d)(2) and 1.33(b) 5. <input type="checkbox"/> Incorporation by reference(useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference herein.		6. <input type="checkbox"/> Microfiche Computer Program (Appendix) 7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy(identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies		
<b>ACCOMPANYING APPLICATION PARTS</b>				
8. <input checked="" type="checkbox"/> Assignment Papers(cover sheet & document(s)) 9. <input type="checkbox"/> 37 CFR 3.73(b)Statement <input type="checkbox"/> Power of Attorney 10. <input type="checkbox"/> English Translation Document (if applicable) 11. <input checked="" type="checkbox"/> Information Disclosure <input checked="" type="checkbox"/> Copies of IDS Statement(IDS)/PTO-1449 Citations 12. <input type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small> 14. <input type="checkbox"/> Small Entity <input type="checkbox"/> Statement filed in prior application, Statement(s) Status still proper and desired 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small> 16. <input type="checkbox"/> Other :				

If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

Continuation  Divisional  Continuation-in-part (CIP) of prior Application No:

#### 18. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label	(Insert Customer No. or Attach bar code label here)	<input checked="" type="checkbox"/> Correspondence address below
--	---	--

NAME	Samuel H. Dworetzky			
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CITY	Middletown	STATE	New Jersey	ZIP CODE
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#### 19. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

NAME	Michele L. Conover	Reg. #	34962
TELEPHONE	908-221-5773		
SIGNATURE	<i>Michele L. Conover</i>	DATE	Dec. 6, 2000

"Express Mail" Mailing Label Number EL618317271US

Date of Deposit 12/06/00

I hereby certify that this application is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, Washington D.C., 20231

Ann E. Taylor  
(Printed Name of Person Mailing Paper)

*Ann E. Taylor*  
(Signature of Person Mailing Paper)

**FEE TRANSMITTAL**

Patent Fees are subject to annual revision on October 1  
 These are the fees effective October 1, 1997  
 Small Entity payments must be supported by a small entity Statement,  
 otherwise, large entity fees must be paid. See Forms PTO/SB/09-12.

**TOTAL AMOUNT OF PAYMENT** \$1184.00

Complete if Known	
Application Number	
Filing Date	
First Named Inventor	Joseph Thomas O'Neil
Examiner Name	
Group/Art Unit	
Attorney Docket No.	2000-0356

**METHOD OF PAYMENT** (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 01-2745  
 Deposit Account Name AT&T CORP.

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17       Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing Date of the Notice of Allowance

2.  Payment Enclosed

Check     Money Order     Other

**FEE CALCULATION****1. FILING FEE**

Large Fee Code	Entity Fee(\$)	Fee Description	Fee Paid
101	710	Utility Filing Fee	\$710.00
106	320	Design Filing Fee	
107	480	Plant Filing Fee	
108	710	Reissue Filing Fee	
114	150	Provisional Filing Fee	
<b>SUBTOTAL (1)</b>			<b>\$710.00</b>

2. CLAIMS	<input type="checkbox"/> New Filing	<input type="checkbox"/> Amendment	
	Extra Claims	Fee from below	Fee Paid
Total	33 - 20 =	13 X 18	= \$234.00
Ind.	6 - 3 =	3 X 80	= \$240.00
Multiple Dependent Claims	0		= \$0.00
<b>SUBTOTAL (2)</b>			<b>\$474.00</b>

Large Fee Code	Entity Fee(\$)	Fee Description
103	18	Claims in excess of 20
102	80	Independent Claims in excess of 3
104	270	Multiple Dependent Claims
109	80	Reissue independent claims over original patent
110	18	Reissue claims in excess of 20 and over original patent
<b>SUBTOTAL (2)</b>		

3. ADDITIONAL FEES		Fee Description	Fee Paid
Large Fee Code	Entity Fee(\$)	Fee Description	Fee Paid
105	130	Surcharge - late filing fee or oath	
127	50	Surcharge - late provisional filing fee or cover sheet	
139	130	Non-English specification	
147	2520	For filing a request for reexamination	
112	920*	Requesting publication of SIR prior to Examiner action	
113	1840*	Requesting publication of SIR after to Examiner action	
115	110	Extension for reply within first month	
116	390	Extension for reply within second month	
117	890	Extension for reply within third month	
118	1390	Extension for reply within fourth month	
128	1890	Extension for reply within fifth month	
119	310	Notice of Appeal	
120	310	Filing a brief in support of an appeal	
121	270	Request for oral hearing	
138	1510	Petition to institute a public use proceeding	
140	110	Petition to revive - unavoidable	
141	1240	Petition to revive - unintentional	
142	1240	Utility issue fee (or reissue)	
143	440	Design issue fee	
144	580	Plant issue fee	
122	130	Petitions to the Commissioner	
123	50	Petitions related to provisional applications	
126	240	Submission of Information Disclosure Statement	
581	40	Recording each patent assignment per property(times number of properties)	
146	710	Filing a submission after final rejection(37 CFR 1.129(a))	
149	710	For each additional invention to be examined (37 CFR 1.129(b))	
Other fee (specify)			
Other fee (specify)			
* Reduced by Basic Filing Fee Paid		<b>SUBTOTAL(3)</b>	

SUBMITTED BY				Complete (if applicable)	
Typed or Printed Name	Michele L. Conover			Reg. Number	34962
Signature		Date	12/06/00	Deposit Account User ID	

SEND TO: Commissioner for Patents, Box: Patent Application, Washington, D.C. 20231